

**Attachment C2: 2015 NAMCS-1 Proposed Changes table
for Office-based Physicians and CHC Physician/Mid-level Providers**

Modifications are in red. Each row represents a change proposed for 2015, and flows sequentially based on how the changes will be seen in the actual automated instrument. Please be aware that the proposed order of the 2015 questions is slightly different from 2014. The first column refers to the question numbers from **Attachment C3**. In the Notes column, changes for both Office-based physicians and CHC providers are referred to as “Both”. Question text changes that only apply to CHC providers are referred to as “CHC”.

Question Number	Variable Name	Modification Type	2014	2015	Notes
Section 1: Telephone Screener					
6a	AMBCARE	Modified text and added answer choices	Do you directly care for ambulatory patients in your work? 1. Yes 2. No-does not give direct care 3. No longer in practice	Do you directly care for ambulatory patients in your work? 1. Yes 2. No-does not give direct care 3. No longer in practice (i.e., retired, not licensed) 4. Temporarily not practicing (refers to duration of 3 months or more)	Both If #3 or #4 is picked, instrument goes to THANK_OOS.
6c	FED	Modified text	(Do/Does) (you/physician's name) work as an employee or a contractor in a federally operated patient care setting (e.g., VA, military, prison) or in a hospital emergency or outpatient department? 1. Yes 2. No	(Do/Does) (you/physician's name) work as an employee or a contractor in a federally operated patient care setting (e.g., VA, military, prison), hospital emergency department , hospital outpatient department, or community health center ? 1. Yes 2. No	Question only for traditional office-based physicians.
6d	PRIVPAT	Modified text	In addition to working in a federally operated patient care setting, hospital emergency or outpatient department, (do/does) (you/physician's name) also see any ambulatory patients in another setting (e.g., office based practice or community health center)? 1. Yes 2. No	In addition to working in a federally operated patient care setting, hospital emergency department , hospital outpatient department, or community health center , (do/does) (you/physician's name) also see any ambulatory patients in another setting (e.g., office based practice or community health center)? 1. Yes 2. No	Question only for traditional office-based physicians.
6f	REMINDER		Although the provider works in a federal patient care setting, please make sure the respondent is aware that all of the following questions are concerned with their private patients.	Although the physician works in a federal patient care setting, hospital emergency department , hospital outpatient department, or community health center please make sure the respondent is aware that all of the following questions are NOT concerned with these settings/patients/visits. The survey is ONLY concerned with their private patients.	Question only for traditional office-based physicians.

Question Number	Variable Name	Modification Type	2014	2015	Notes
7a	ADDCHECK	Modified text	We have your address as (read address). Is that the correct address for your office?	We have your address as (read address). Is that the correct address for the CHC ?	CHC
7b	NEW_PINFO	Modified text	What is the correct address and phone number of your office?	What is the correct address and phone number of your current CHC location ?	CHC
8	THANK_OOS	Modified text	Thank you, Dr. (fill), but I believe that since you do not (see any ambulatory patients/practice any longer), our questions would not be appropriate for you. I appreciate your time and interest.	Thank you, Dr. (fill name), but since you are not currently practicing , our questions would not be appropriate for you. I appreciate your time and interest.	Both
8a	WHYNO_PRACT	Deleted answer choice	Why isn't the doctor practicing? 1. Retired 2. Not licensed 3. Temporarily not practicing 4. Other	Why isn't the doctor practicing? 1. Retired 2. Not licensed 3. Temporarily not practicing 4. Other	Both If #3 is picked in AMBCARE, the physician is read THANK_OOS, and then this question.
8b	WHY_OOS		Describe the provider's practice or medical activities which define him/her as ineligible or out-of-scope. Enter all that apply, separate with commas 1. Federally employed 2. Radiology, anesthesiology or pathology specialist 3. Administrator 4. Work in institutional setting 5. Work in hospital emergency department or outpatient department 6. Work in industrial setting 7. Ambulatory surgicenter 8. Laser vision surgery Other – Specify WHY_OO_SP	Describe the provider's practice or medical activities which define him/her as ineligible or out-of-scope. Enter all that apply, separate with commas 9. Federally employed 10. Radiology, anesthesiology or pathology specialist 11. Administrator 12. Work in institutional setting 13. Work in hospital emergency department, hospital outpatient department, or community health center 14. Work in industrial setting 15. Ambulatory surgicenter 16. Laser vision surgery 17. Other – Specify WHY_OO_SP	Both If AMBCARE=3 and WHYNO_PRACT=3, then Go to WHY_OOS
8c	WHY_UNAVAIL	Modified text	Why is provider unavailable or not in practice? Verbatim response	Why is provider temporarily not practicing ?	Both If #4 is picked in AMBCARE above, the physician is read THANK_OOS, and then this question.

Questions for Non-responding physicians (10a-10g)

Before 10a	Before NUMLOCR	Modified heading	I appreciate that you choose not to participate in the study, but I would like to ask a few short questions about your practice so we can make sure responding physicians do not differ from non-responding physicians.	I appreciate that you choose not to participate in the study, but I would like to ask a few short questions about the CHC at this location so we can make sure responding providers do not differ from non-responding providers.	CHC
10a	NUMLOCR	Modified text	At how many different office locations do you see ambulatory patients? Do not include settings such as EDs, outpatient departments, surgicenters, and Federal Clinics.	Overall , at how many different office locations do you see ambulatory patients? Do not include settings such as EDs, outpatient departments, surgicenters, Federal Clinics, and community health centers .	Both
New	NUMLOCR_CHC	New Question	N/A	Overall, at how many different CHC locations do you see ambulatory patients?	CHC

Question Number	Variable Name	Modification Type	2014	2015	Notes
10e	NUMVISR	Modified text	During your last normal week of practice how many patient visits did you have at all office locations?	During your last normal week of practice how many patient visits did you have at all CHC locations?	CHC
10g	NUMPAR	Modified text	At the office location where you see the most ambulatory patients: How many physicians are associated with you?	At the current CHC location: How many physicians are associated with you?	CHC
10g(2)	SINGSPCR	Modified text	Is this a single- or multi-specialty group practice?	At the current CHC location: Is this a single- or multi-specialty CHC at this location?	CHC
10g(3)	OWNERSHR	Modified instruction		At the current CHC location: Are you a full- or part-owner, employee, or an independent contractor?	CHC
10g(4)	OWNSR	Modified text	Who owns the practice?	At the current CHC location: Who owns the CHC at this location?	CHC
Section 2: Induction Interview					
Before 11a-fifth paragraph	Before NUMLOC	Introductory text	First, I have some questions to ask about your practice. Your answers...	First, I have some questions to ask about the CHC at this location . Your answers...	CHC
11a	NUMLOC	Modified text	Overall, at how many office locations, (do/does) (you/physician's name) see ambulatory patients? Do not include settings such as EDs, outpatient departments, surgicenters, and Federal clinics.	Overall, at how many different office locations, (do/does) (you/physician's name) see ambulatory patients? Do not include settings such as EDs, outpatient departments, surgicenters, Federal clinics, and community health centers .	
12a	SEEPAT	Modified text	This study will be concerned with the AMBULATORY patients you will see in your office(s) during the week of Monday (fill) through Sunday (fill). Are you likely to see any ambulatory patients in your office(s) during that week?	This study will be concerned with the AMBULATORY patients you will see at this CHC location during the week of Monday (fill) through Sunday (fill). Are you likely to see any ambulatory patients at the current CHC location during that week?	CHC
12c	CHECK_BACK	Modified text	Since it's very important that we include any ambulatory patients that you might see in your office during that week, I'll check back with your office (start date) to make sure your plans have not changed.	Since it's very important that we include any ambulatory patients that you might see at this CHC location during that week, I'll check back with you (start date) to make sure your plans have not changed.	CHC
New	CUR_CHC_ADD	New	N/A	What does the current address below represent? (fill with original or updated CHC address) 1. Sampled CHC location (Go to OTHLOC) 2. Sampled CHC that moved (Go to OTHLOC) 3. Not sampled CHC location (Go to CALL_RO_PHYS)	CHC

Question Number	Variable Name	Modification Type	2014	2015	Notes
New	CALL_RO_PHYS	New	N/A	Call your RO and inform them of the situation. Await resolution from the RO before continuing with this case.	CHC This question will be asked if answer choice #3 is selected for CUR_OFFICE
13b	OFFICETYP	Modify answer list	<p>Looking at this list, choose ALL of the type(s) of settings that describe the office at [Fill Office location].</p> <ol style="list-style-type: none"> 1. Private solo or group practice 2. Hospital emergency department 3. Freestanding clinic/urgicenter (not part of a hospital outpatient department) 4. Hospital outpatient department 5. Community Health Center (e.g. Federally Qualified Health Center (FQHC), federally funded clinics or 'look alike' clinics) 6. Ambulatory surgicenter 7. Mental health center 8. Institutional setting (school infirmary, nursing home, prison) 9. Non-federal Government clinic (e.g., state, county, city, maternal and child health, etc.) 10. Industrial outpatient facility 11. Family planning clinic (including Planned Parenthood) 12. Federal Government operated clinic (e.g., VA, military, etc.) 13. Health maintenance organization or other prepaid practice (e.g., Kaiser Permanente) 14. Laser vision surgery 15. Faculty practice plan 	<p>For Traditional office-based, #5 CHC option is deleted from the in-scope list and moved to #16 out-of-scope option. (Odd numbered options are in-scope and even numbered options are out-of-scope)</p> <p>*****</p> <p>For CHCs, choice #5 will be automatically populated and no other locations can be selected.</p> <p>(5) Community Health Center (e.g., Federally Qualified Health Center (FQHC), federally funded clinics or 'look alike' clinics)</p> <p>Since we sampled the CHC location, we know the provider is working at a CHC-no need to verify.</p>	

Question Number	Variable Name	Modification Type	2014	2015	Notes
13c	OTHLOC	Modified text	Are there other office locations where you NORMALLY would see patients, even though you will not see any during your 7-day reporting period? Do not include settings such as EDs, outpatient departments, surgicenters, and Federal clinics.	Traditional Office-based: Are there other office locations where (you/physician's name) NORMALLY would see patients, even though (you/physician's name) will not see any during (Your/ his/her) 7-day reporting period? Do not include settings such as EDs, outpatient departments, surgicenters, Federal clinics, and community health centers . 1. Yes Go to OTHLOCVS 2. No Skip to ESTDAYS CHC: Are there other CHC locations where you NORMALLY would see patients, even though you will not see any during your 7-day reporting period? 1. Yes Goto OTHLOC_NUM 2. No Skip to ESTDAYS	
New	OTHLOC_NUM	New	N/A	In how many other CHC locations do you NORMALLY see patients? _____ Number of locations	CHC
13d	OTHLOCVS	Modified text	Of these locations where you will not be seeing patients during your 7-day reporting period, how many total <u>office visits</u> did you have during your last week of practice at these locations?	Of these CHC locations where (you/physician's name) will not be seeing patients during (Your/ his/her) 7-day reporting period, how many total <u>office visits</u> did (you/physician's name) have during (Your/ his/her) last week of practice at these CHC locations?	CHC
14a	ESTDAYS	Modified text	During the week of Monday, (fill) through Sunday, (fill) how many days do you expect to see any ambulatory patients at the following location?	During the week of Monday, (fill) through Sunday, (fill) how many days do you expect to see any ambulatory patients at this CHC location?	CHC
14b-15j	ESTVIS - FEDTXID	Modification text	Information for office locations #2-#5	Only collect information on currently sampled CHC-location #1	CHC Since we are only interested in sampled CHC information, no need to collect information from other locations. Office locations #2-#5 will not be displayed in automated instrument.
14b	ESTVIS	Modified text	During your last normal week of practice, approximately how many office visit encounters did you have at each office location?	During your last normal week of practice, approximately how many office visit encounters did you have at this CHC location? Only include the visits to the sampled CHC provider.	CHC

Question Number	Variable Name	Modification Type	2014	2015	Notes
14c	SAME	Modified text	During the week of Monday, (fill) through Sunday (fill), do you expect to have about the same number of visits as you saw during your last normal week in each office taking into account time off, holidays, and conferences?	During the week of Monday, (fill) through Sunday (fill), do you expect to have about the same number of visits as you saw during your last normal week at the current CHC location taking into account time off, holidays, and conferences?	CHC
14d	ESTVISP	Modified text	Approximately how many ambulatory visits do you expect to have at this office location?	Approximately how many ambulatory visits do you expect to have at this CHC location?	CHC
15a	SOLO	Modified text	Now, I'm going to ask about your practice at (fill location). Do you have a solo practice, or are you associated with other physicians in a partnership, in a group practice, or in some other way at (fill location)?	Now, I'm going to ask about the CHC at (fill location). Do you work in a solo CHC , or are you associated with other physicians in a partnership, in a group CHC , or in some other way at (fill location)?	CHC
15c	MULTI	Modified text	Is this a single- or multi-specialty group practice at (fill location)?	Is this a single- or multi-specialty CHC at (fill location)?	CHC
15f	OWNS	Modified text	Who owns the practice at (fill location)?	Who owns the CHC at (fill location)?	CHC
15g	ONSITE_EKG – ONSITE_XRAY	Modified text	Does your practice have the ability to perform any of the following on site at (fill location)? 1. EKG/ECG 2. Phlebotomy 3. Lab testing (not including urine dipstick, urine pregnancy, fingerstick blood glucose, or rapid swab testing for infectious diseases) 4. Spirometry 5. Ultrasound 6. X-ray	Does the CHC have the ability to perform any of the following on site at (fill location)?	CHC
15h	PATEVEN	Modified text	Do you see patients in the office during the evening or on weekends at (fill location)?	Do you see patients in the CHC during the evening or on weekends at (fill location)?	CHC
15j	FEDTXID	Modified text	What is your Federal Tax ID at (this/that in-scope location)?	What is your Federal Tax ID, also known as an Employer Identification Number (EIN) , at (Office location)?	Both
New National CLAS Standards Questions					
New	CLASTRAIN	New	N/A	The following two questions are about cultural competence. Within the past 12 months, have you participated in any cultural competence training? 1. Yes 2. No	Both Must be answered by the sampled provider.

Question Number	Variable Name	Modification Type	2014	2015	Notes
New	CLASKNOW	New	N/A	<p>How familiar are you with the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (the National CLAS Standards)?</p> <ol style="list-style-type: none"> 1. Never heard of it 2. Heard of it but do not know much about it 3. Know something about it 4. Very familiar with it 	Both Must be answered by the sampled provider.
New Alcohol Screening and Brief Intervention (SBI) Questions (17-22)					
New	ALCOHOL_INTRO	New Alcohol Question	N/A	<p>The next set of questions are only administered to primary care providers and seeks to determine the extent to which alcohol screening and brief intervention (SBI) is being conducted within their practices.</p>	Both
17	ALCSCREEN ALCSCREENOTH	New Alcohol Question	N/A	<p>Screening for alcohol misuse (excessive consumption and alcohol-related problems) is often conducted in clinical settings. How do you screen for alcohol misuse?</p> <ol style="list-style-type: none"> 1. I don't screen 2. T-ACE 3. TWEAK 4. CAGE 5. CRAFFT 6. AUDIT 7. Ask number of drinks per occasion 8. Ask frequency of drinking 9. Ask binge question 10. I don't use a formal screening instrument 11. Other (specify): ALCSCREENOTH 	Both
18	ASCREENOFT	New Alcohol Question	N/A	<p>How often do you screen for alcohol misuse?</p> <ol style="list-style-type: none"> 1. At every health maintenance visit (annually) 2. At every health care visit 3. When I suspect a patient has a substance/alcohol-related problem 4. Almost never or never 	Both
19	ASCREENADM ASCREENADMOTH	New Alcohol Question	N/A	<p>How are screening question(s) administered?</p> <ol style="list-style-type: none"> 1. Interview 2. patient completes a form 3. Electronic 4. Other (specify): ASCREENADMOTH 	Both

Question Number	Variable Name	Modification Type	2014	2015	Notes
20	ASCREENWHO ASCREENWHOTH	New Alcohol Question	N/A	<p>If patient is interviewed, who administers the screening?</p> <ol style="list-style-type: none"> 1. Physician, nurse practitioner, physician assistant 2. Nurse excluding nurse practitioner 3. Medical assistant 4. Administrative staff 5. Other (specify) <p>ASCREENWHOTH</p>	Both This question is asked when #1 is selected in ASCREENADM
21	ABRFINTERV	New Alcohol Question	N/A	<p>Brief interventions for risky alcohol use are short discussions with patients who drink too much or in ways that are harmful. These interventions typically include some of the following elements:</p> <ul style="list-style-type: none"> • Feedback on screening results • Gathering further information on drinking patterns, alcohol-related harm, or symptoms of alcohol dependence • Discussing the risks and consequences of drinking too much • Providing advice about cutting back or stopping <p>Among patients who screen positive for risky alcohol use, how often are brief interventions conducted?</p> <ol style="list-style-type: none"> 1. Never 2. Sometimes 3. Often 4. Always 	Both

Question Number	Variable Name	Modification Type	2014	2015	Notes
22	ARESOURCE ARESOURCEOTH	New Alcohol Question	N/A	What resources would be helpful in implementing alcohol/substance screening and intervention in primary care settings? (Select all that apply) 1. Implementation guide for alcohol screening and intervention 2. Training on how to conduct alcohol screening 3. Training on how to conduct intervention 4. Office-based mentoring 5. Access to patient education materials 6. Scripts on what to say to patients 7. Information about reimbursement for services 8. Information about where or how to refer for additional services 9. Other (specify) ARESOURCEOTH	Both
Workforce Questions (23-34)					
23-34	MOSTVIS_INTRO – CNM_BILL	Modified question order	Current order using 2014 question numbers in Attachment C1: 17-27	New order using 2014 question numbers in Attachment C1: 17-18, 22-27, 19-21	For traditional physicians, the order of the workforce questions were revised so questions that refer to the physician’s practice are grouped together, and the questions that relate to the office with the most visits were also grouped together. All CHC workforce questions pertain to the currently sampled CHC and were re-ordered to mimic the flow of the traditional physician’s instrument.
23	MOSTVIS_INTRO	Modify text	The next set of questions pertain to characteristics of the sampled physician’s healthcare workforce, including physicians and other allied health care providers.	The next section refers to characteristics of the sampled [physician’s practice/CHC].	Question text changes for both with tailored “CHC” wording for CHC providers.

Question Number	Variable Name	Modification Type	2014	2015	Notes
24	NUMPH	New heading (For one location listed)	N/A	<p>Traditional Office-based (1 loc): The next questions are about the practice that is associated with (fill location).</p> <p>Trad Office-based (2+ loc): The next questions are about the practice that is associated with (fill location), which is the location where the physician has the most office visits.</p> <p>CHC: The next questions are about the CHC that is associated with (fill location).</p> <p>How many physicians, including you are associated with this CHC?</p>	Both This text precedes the block of workforce questions.
25	PCMH	Modified text	Is your practice <u>certified</u> as a patient-centered medical home?	Is the CHC at this location certified as a patient-centered medical home?	CHC
26	ACCESS	Modified text	Is it possible within your practice to access patient medical records using an electronic health record (EHR) system 24 hours a day?	Is it possible within the CHC at this location to access patient medical records using an electronic health record (EHR) system 24 hours a day?	CHC
27	PMETHOD	Modified text	What is the primary method by which your practice receives information about patients in your practice when they have been seen in the emergency department or hospitalized?	What is the primary method by which the CHC at this location receives information about patients in this CHC when they have been seen in the emergency department or hospitalized?	CHC
28	TRANS	Modified text	Is someone in your practice responsible for assisting patients to safely transition back to the community within 72 hours of being discharged from a hospital or nursing home?	Is someone in the CHC at this location responsible for assisting patients to safely transition back to the community within 72 hours of being discharged from a hospital or nursing home?	CHC
29	PROTO	Modified text	Does your practice have written protocols for providing chronic care services that are used by all members of the care team?	Does the CHC at this location have written protocols for providing chronic care services that are used by all members of the care team?	CHC
30	QUAL	Modified text & added answer choice	Does your practice report any quality measures or quality indicators to either payers or to organization that monitor health care quality? 1. Yes 2. No	Does the CHC at this location report any quality measures or quality indicators to either payers or to organization that monitor health care quality? 1. Yes 2. No 3. Unknown	CHC

Question Number	Variable Name	Modification Type	2014	2015	Notes
31	DIFTIN	Modified text	Do all other locations or offices associated with this practice use the same Federal Tax ID or do any locations or offices associated with this practice use a different Federal Tax ID? 1. All use the same Federal Tax ID 2. Some use a different Federal Tax ID 3. Unknown	Do all other locations or offices associated with this [practice/ the CHC at this location] use the same Federal Tax ID, also known as an Employer Identification Number (EIN) , or do any locations or offices associated with this [practice/ the CHC at this location] use a different Federal Tax ID or EIN ? 1. All use the same Federal Tax ID or EIN 2. Some use a different Federal Tax ID or EIN 3. Unknown	Both
32	Instructions before MD_DO_FT to CHW_PT	New heading	N/A	The next set of questions refer to the types of providers who work at [Pre-fill location].	Both This heading will appear before the block of staffing questions.
32	MD_DO_FT to CHW_PT	Modified text	How many of the following full-time and part-time providers are on staff at the office location where you have the most office visits?	How many of the following full-time and part-time providers are on staff at (fill location) ?	Both
32	LPN_PT to CHW_PT	Add new answer choices	N/A	Number of part-time providers on staff: <ul style="list-style-type: none"> • Licensed Practical Nurses (LPN) • Certified Nursing Assistants/Aids (CNA) • Medical Assistants (MA) • Radiology Technicians (RT) • Laboratory Technicians (LT) • Physical Therapists (PT) • Pharmacists (Ph) • Dietitians/Nutritionists (DN) • Mental Health Providers (MH) • Health Educators/Counselors (HEC) • Case Managers (not RNs)/Certified Social Workers (CSW) • Community Health Workers (CHW) 	Both Add ability to document additional part-time staff working at the sampled CHC location.
33	Task_Body to Task_Contacts	Modified text	At this office location where you have the most visits, which type of provider <u>most commonly</u> performs the following tasks?	At (fill location) , which type of provider most commonly performs the following tasks?	Both
34	Instructions for PA_SUP to CNM_BILL	Modified text	The following questions concern the mid-level providers practicing at this location where you have the most office visits.	The following questions concern the PAs, NPs, and CNMs practicing at (fill location) .	Both

Question Number	Variable Name	Modification Type	2014	2015	Notes
34a(5)	PA_BILL	New	N/A	Do/Does the PA(s) bill for services using their own NPI number? 1. Yes, always 2. Yes, sometimes 3. No 4. Unknown/Not applicable	Both
Electronic Health Record (EHR) Questions #35-51 (see Attachment C1 #28-38d)					
35	EMR_INTRO	Modified heading	Answer all remaining questions for the in-scope location with the most visits which is (fill location).	Answer all remaining questions for the current CHC location , which is (Pre-fill location).	CHC
36	EBILLREC	Modified text	Does the reporting location submit any claims electronically (electronic billing)?	Does the CHC reporting location submit any claims electronically (electronic billing)?	CHC
37a	EMEDREC	Modified text	Does the reporting location use an electronic health record (EHR) or electronic medical record (EMR) system? Do not include billing record systems.	Does the CHC reporting location use an electronic health record (EHR) or electronic medical record (EMR) system? Do not include billing record systems.	CHC
37b	EHRINSYR	Modified text	In which year did you install your current EMR/EMR system?	In which year did the CHC install your current EHR/EMR system?	CHC
37c	HHSMU	Modified text	Does your current system meet meaningful use criteria as defined by the Department of Health and Human Services?	Does the CHC's current system meet meaningful use criteria as defined by the Department of Health and Human Services?	CHC
37d	EHRNAM	Modified text	What is the name of your current EHR/EMR system?	What is the name of the CHC's current EHR/EMR system?	CHC
38	SECURCHCK	Modified text	Has your practice made an assessment of the potential risks and vulnerabilities of your electronic health information within the last 12 months? This would help identify privacy or security related issues that may need to be corrected.	Has the CHC made an assessment of the potential risks and vulnerabilities of your electronic health information within the last 12 months? This would help identify privacy or security related issues that may need to be corrected.	CHC
39	DIFFEHR	Modified text	Does your EHR have the capacity to electronically send health information to another provider whose EHR system is different from your system?	Does the CHC's EHR have the capacity to electronically send health information to another provider whose EHR system is different from the CHC's ?	CHC
40	EMRINS	Modified text	At the reporting location are there plans for installing a new EHR/EMR system within the next 18 months?	At the CHC reporting location are there plans for installing a new EHR/EMR system within the next 18 months?	CHC
41a	MUINC	Modified text	Medicare and Medicaid offer incentives to practices that demonstrate "meaningful use of health IT." At the reporting location, are there plans to apply for Stage 1 of these incentive payments?	Medicare and Medicaid offer incentives to CHCs that demonstrate "meaningful use of health IT." At the CHC reporting location, are there plans to apply for Stage 1 of these incentive payments?	CHC
42	EDEMOG - EPTREC	Modified text	Please indicate whether the ambulatory reporting location has each of the following computerized capabilities and how often these capabilities are used.	Please indicate whether the CHC reporting location has each of the following computerized capabilities and how often these capabilities are used.	CHC
44a	REFOUT	Modified text	Do you refer any of your patients to providers outside of your office or group?	Do you refer any of your patients to providers outside the CHC ?	CHC

Question Number	Variable Name	Modification Type	2014	2015	Notes
45a	REFIN	Modified text	Do you see any patients referred to you by providers outside of the office or group?	Do you see any patients referred to you by providers outside of the CHC ?	CHC
46d	INCORINFO	Modified text	Can you automatically incorporate the received information into your EHR system without manually entering the data?	Can you automatically incorporate the received information into the CHC's EHR system without manually entering the data?	CHC
47c	EHRTOEHR	Modified text	Is the patient health information that you share electronically sent directly from your EHR system to another EHR system?	Is the patient health information that you share electronically sent directly from the CHC's EHR system to another EHR system?	CHC
48	EOUTINFO	New EHR question	N/A	Are you/your staff able to electronically find health information (e.g. medications, outside encounters) from sources outside of the [office/ CHC] for your patients? Please reference (fill location), which is the [in-scope office with the most visits/ current CHC location]. Enter all that apply. 1. Yes routinely 2. Yes, but not routinely 3. No 4. Unknown	New question for both. Use tailored question text for CHC.
49	EOUTHOW EOUTOSP	New EHR question	N/A	How do you look up patient health information from sources outside of the [office/ CHC]? Please reference (fill location), which is the [in-scope office with the most visits/ current CHC location]. Enter all that apply. 1. Through you're EHR/EMR 2. Web portal (separate from EHR/EMR) 3. View only or restricted access to other providers' EHR system 4. Other electronic method (not fax) EOUTOSP	New question for both. Use tailored question text for CHC.
50	EOUTYP EOUTYSP	New EHR question	N/A	What types of information do you routinely look up? 1. Lab results 2. Imaging reports 3. patient problem lists 4. Medication lists 5. Other EOUTYSP	New question for both.
51	EOUTINCORP	New EHR question	N/A	Do you or your staff routinely incorporate the information you look up into your EHR? 1. Yes, via manual entry or scanned copy 2. Yes, automatically able to incorporate without manual entry or scanning 3. No, we do not routinely incorporate into our EHR	New question for both.

Question Number	Variable Name	Modification Type	2014	2015	Notes
52	PRMCARE PRMAID PRPRVT PRPATPAY PROTH	Modified heading	Please remind physician/provider that the remaining questions refer to all offices that were determined to be in-scope.	Please remind physician/provider that the remaining questions refer to the current CHC location, which is [fill location].	CHC
52	PRMCARE PRMAID PRPRVT PRPATPAY PROTH	Modified text	I would like to ask a few questions about your practice revenue and contracts with managed care plans.	I would like to ask a few questions about the current CHC's revenue and contracts with managed care plans.	CHC
53	PCTRVMAN	Modified text	Roughly, what percent of the patient care revenue received by this practice comes from managed care contracts?	Roughly, what percent of the patient care revenue received by this CHC comes from managed care contracts?	CHC
55a	ACCEPTNEW	Modified text	Are you currently accepting "new" patients into your practice(s) at (fill location)?	Are you currently accepting "new" patients into the CHC at (fill location)?	CHC
57	COMP	Modified text	Clinical practices may take various factors into account in determining the compensation (salary, bonus, pay rate, etc.) paid to the physicians in the practice. Please indicate whether the practice explicitly considers each of the following factors in determining your compensation.	CHCs may take various factors into account in determining the compensation (salary, bonus, pay rate, etc.) paid to the physicians/ providers in the CHC . Please indicate whether the CHC explicitly considers each of the following factors in determining your compensation.	CHC
58a & 58b	SASDAPPT SDAPPT	Modified text & question order	Current order: 45a. Roughly, what percent of your daily visits are same day appointments? 45b. Does your practice set time aside for same day appointments?	New order: 45a. Does the CHC set time aside for same day appointments? 45b. Roughly, what percent of your daily visits are same day appointments?	In addition to text change, the order questions referenced are simply being switched. For CHC, use tailored text